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CONFIRMATION NO. 3849

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APPLICANTS

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**** CONTINUING DATA *******

This application is a CIP of 09/415,622 10/12/1999 ABN
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**** FOREIGN APPLICATIONS *********** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY ****
 09/19/2000

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and	/JASON D CARDONE/ Examiner's Signature			MA		39	1
Acknowledged							

ADDRESS

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TITLE

PERSONAL COACHING SYSTEM FOR CLIENTS WITH ONGOING CONCERNs SUCH AS WEIGHT LOSS

FILING FEE RECEIVED 646	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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